## **SEEC FORM 20**

Itemized Campaign Finance Disclosure Statement CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION Revised January 2012

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BRISTOL, CT

**COVER PAGE** 

1. NAME OF COMMITTEE			
Cheryly Council			
2. TREASURER NAME			
First	MI	Last	Suffix
TREASUBED ADDRESS		Fitzgeralo	X
3. TREASURER ADDRESS Street Address	City	<u> </u>	State Zip Code
515 Stevens		305/01	CT 06010
4. ELECTION/REFERENDUM DATE	5. OFFICE SOUGHT (Complete only	v if Candidate Committee)	6. DISTRICT NUMBER
(mm/dd/yyyy) 11/07/2017	City Counc		(if applicable) Third
7. CANDIDATE NAME (Complete only if			
Che 71	L.	Thibeault	Suffix
8. TYPE OF REPORT (Check One Box)			200
January 10 filing	7th day preceding primary	7th day preceding referendum	O Initial Contribution or Disbursement
April 10 filing	■30 days following primary	O 45 days following referendum	(PACs ONLY)  Amendment to
O July 10 filing	O7th day preceding election	O Deficit	Type of Report:
October 10 filing	12th day preceding election (State Central Committees Only)	Termination	Jan 10 Filing
Independent Expenditure Primary Election	O45 days following election not held in November		
9. PERIOD COVERED	and the state of t		
	Beginning Date	Ending Date	
	Oct. 30,2017	thru Dec. 31,20	017 -
10. CERTIFICATION			
I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance  Disclosure Statement for the period covered is true, accurate and complete.			
TREASURER OR DEPUTY PREASURER (SIGNATURE)  TO THE TREASURER OR DEPUTY PREASURER (SIGNATURE)			
PENALTY FOR FALSE STATEMENT IS PUNISHABLE BY FINE NOT TO EXCEED \$1,000, OR IMPRISONMENT FOR NOT MORE THAN ONE YEAR, OR BOTH.			